Special Health Care Needs

Family Partnership

Mission

To communicate, advocate, and network through a family and agency team-supported effort to enable individuals with special health care needs to reach their fullest potential throughout life.

Description/Eligibility

The Family Partnership provides support and information and an opportunity for families of special needs individuals to connect with each other. To be eligible to participate in Family Partnership, you must be a parent, legal guardian or sibling of an individual with special needs.

Goals

- Provide families with the opportunity to offer each other support and information.
- Give families the opportunity to provide SHCN input on the needs of special needs individuals.
- Increase public awareness of the issues facing families of individuals with special needs.
- Build community awareness of the unique needs of individuals with disabilities.
- Promote state legislation for programs for special needs individuals and their families.

Special Health Care Needs PO Box 570 Jefferson City, MO 65102-9813

Phone: 573-751-6246 Toll free: 800-451-0669

www.dhss.state.mo.us/SHCN/FamilyPartnership/index.html